

# ***Patient Consent Management: What is it? Why does it matter?***

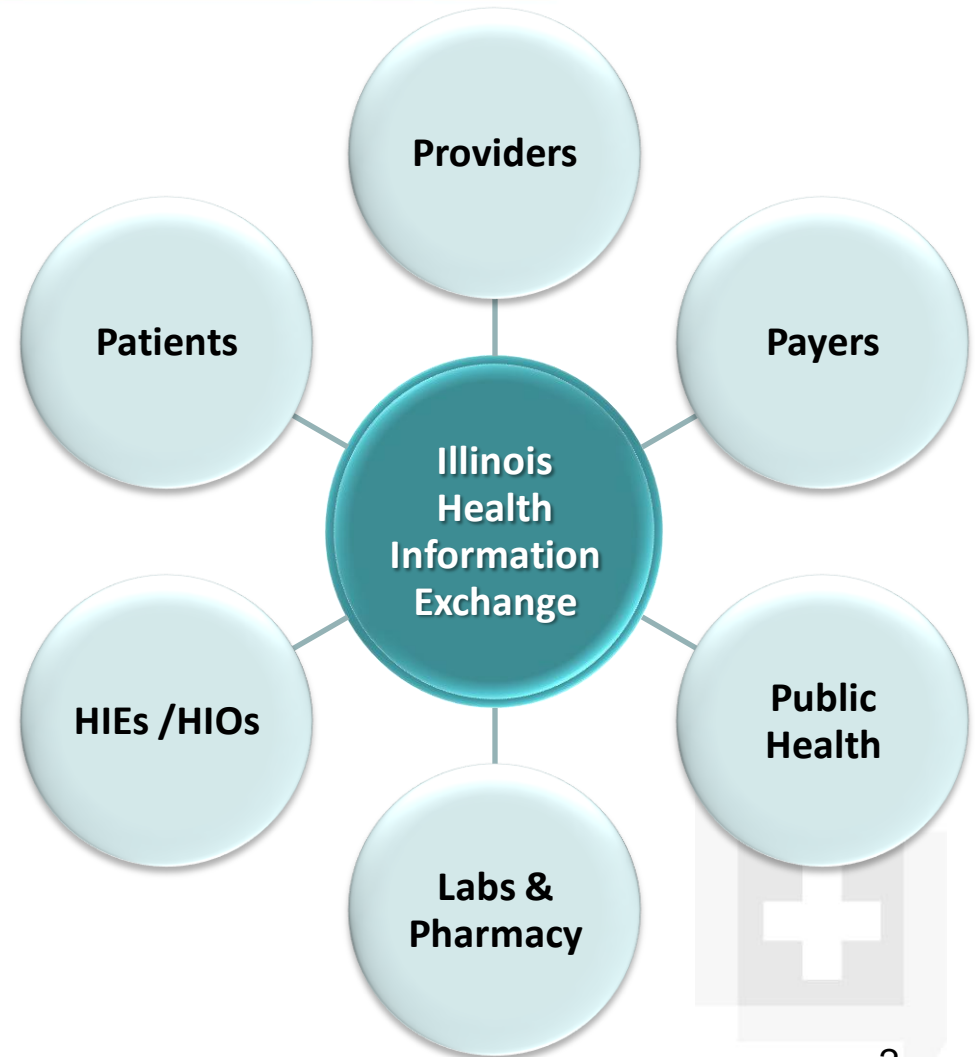
## **BHIP Second Statewide Meeting Thursday, November 1, 2012**

**Mark Chudzinski, General Counsel  
Illinois Office of Health Information Technology  
Office of the Governor**

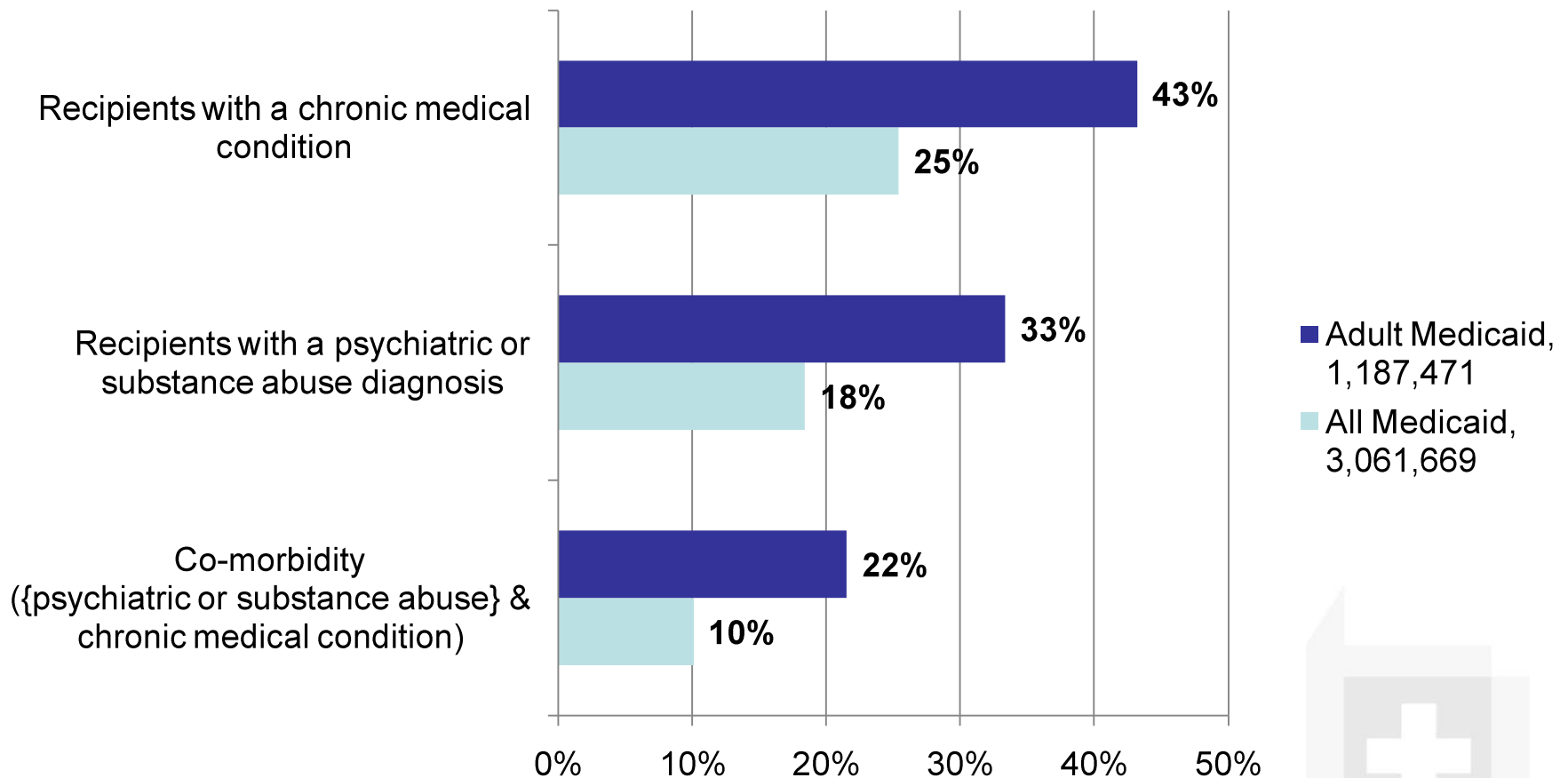
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# HIE network hub concept

Secure, effective,  
and efficient  
exchange of health  
information in  
compliance with  
state and federal  
standards, laws, and  
regulations



# Behavioral Health Disorders in the Medicaid Population



Source: Illinois Department of Healthcare & Family Services, October 2012

# Sharing of Clinical Data Is Key

- Health care ecosphere is complex
- Successful treatment of a single patient involves multiple parties
  - Clinical treatment is delegated among multiple specialists
  - Location of clinical treatment is distributed among different types of facilities during patient's course of treatment
  - Payment for treatment from multiple sources
  - Management of multiple parties and processes requires evaluation systems which measure and assess results



# Goals of the Illinois Health Information Exchange



- Improve health care quality and outcomes
- Control the cost of health care and enhance value for patients and payers
- Maximize federal health information technology funding to Illinois and its health care providers
- Enhance public health and disease surveillance; reduce disparities



# ILHIE Act: Protection of patient privacy & security

- “The Authority shall establish minimum standards for accessing the ILHIE to ensure that the appropriate **security and privacy protections** apply to health information, consistent with applicable federal and State standards and laws.”



- Dec. 1, 2011: Formation by ILHIE Authority Board of Data Security and Privacy Committee

“The Committee’s role is to review, evaluate and recommend **ILHIE data privacy and security policies**, and to oversee the development of new ILHIE data privacy and security policy recommendations with appropriate collaboration with State of Illinois stakeholders, policy developers and implementers.”



# ILHIE DSPC Deliberations



- Testimony of 30+ stakeholder representatives and members of the general public
  - All proceedings public
  - 5 sets of hearings (2/8, 3/29, 5/3, 7/17, 7/28)
  - Input from health care services providers and consumers; 4 RHIOs; subject matter experts
  - 450+ pages of publicly- posted documents

hie.illinois.gov : Data Security and Privacy Committee



## Data Security and Privacy Committee

### [Committee Member List](#)

#### August 17, 2012

- [ILHIE Authority Data Security & Privacy Committee - August 17, 2012 Meeting Agenda](#)

#### August 13, 2012

- [ILHIE Authority Data Security & Privacy Committee - August 13, 2012 Meeting Agenda](#)

#### July 27, 2012

- [ILHIE Authority Data Security & Privacy Committee - July 27, 2012 Meeting Agenda](#)
- [Behavioral Health Report - BHIP Summit Preliminary Findings](#)
- [Substance Abuse Report](#)
- [Genetic Testing Report](#)
- [AIDS Confidentiality Act Report](#)

#### Working Papers

- [Obtaining and Maintaining Consent - Operational Considerations](#)
- [Consent Models - Empirical Evidence](#)
- [Options for Storing Electronic Consent](#)

#### Public Testimony

- [Dr. Tom Mikkelsen, LincolnLand Health Information Exchange/Illinois Health Information Exchange Partners](#)
- [Dr. Fred Rachman, The Alliance of Chicago Community Health Services](#)
- [Esther Sciammarella, Chicago Hispanic Health Coalition](#)
- [Harry Rhodes, HIM Solutions - Testimony | PowerPoint Slides](#)
- [Ed Murphy, Central Illinois Health Information Exchange](#)

[http://www2.illinois.gov/hie/Pages/DataSecurityandPrivacy.aspx\(8/22/2012 11:27:35 AM\)](http://www2.illinois.gov/hie/Pages/DataSecurityandPrivacy.aspx(8/22/2012 11:27:35 AM))

# Barriers to HIE in Current Laws

- MHDDCA requires patient consent with considerable specificity for release of data
  - Prohibits “blanket consent”
  - Prohibits “advance consent”
  - Durational limit on consent
- MHDDCA application unclear and arguably restricts data aggregation query-response HIE to disclose data without a new consent at the time of each data release
  - Future data recipients not known (at data creation)
  - Date of future data release not known



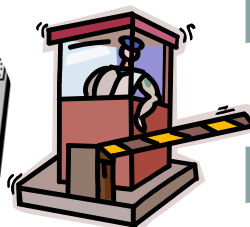
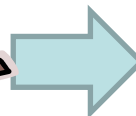
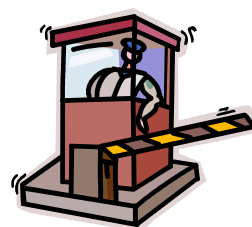


# MetroChicago-HIE data filters

## MetroChicago-HIE data filters

“Excluded data”: mental health; substance abuse

“Highly Confidential data”: HIV/AIDS; genetic testing



Excluded data:

Mental health;  
Substance abuse

Confidential data:

HIV/AIDS;  
Genetic testing

Opt-out:

All data

# Report of Preliminary Findings & Recommendations

- 67-page report, including 5 exhibits
- 28 numbered Findings & Recommendations
  - Grouped into 20 categories

Core Commitment to Privacy and Security	Opt-Out Override/ Break-the-Glass
The Importance of Information Sharing	Continuation of “Opt-In” under Current Laws
The Role of HIT Technology	Administrative Burdens
National Interoperability	Barriers to HIE in Current Laws
Harmonizing Illinois Law	Future Segmentation of PHI
Meaningful Use Incentives	Data Security Protections and Assurance
Efficiency	Control of Data by Data Custodians
Public Health	Neutrality on Merits of Data Custodian Disclosure Restrictions
Balancing of Stakeholder Interests	Unique Patient Identifier
Enhancing Patient Protection: Opt-Out Policy	Next Steps

# 5 Key Preliminary Findings & Recommendations

1. Multi-staged approach to implementation of ILHIE and the privacy & security policies which current technology enables
2. Harmonization of IL law with Federal law (e.g. HIPAA); amend IL laws
  - Reduce IL law uncertainty
  - Look to Federal law leadership to facilitate national HIE inter-operability
3. Encourage flow of PHI into HIE for HIE purposes, but provide patient privacy protection with patients being given “opt-out” choice for HIE participation
4. Since PHI segmentation is currently not technically practical, launch the ILHIE with an “all-data-in or all-data-out” patient choice, but as technology matures, introduce more granular patient choices for what PHI patients wish to share with whom
5. Adopt measures to build provider and patient trust in the ILHIE

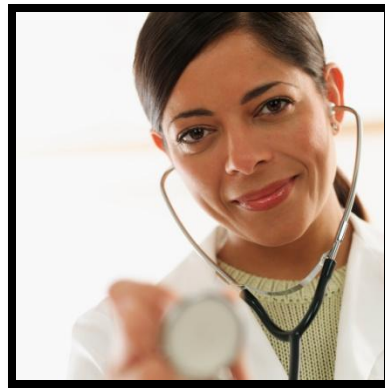


# Stage 1: Creation and Release of PHI

## Patient Presents at Primary Care Physician

1. Patient presents at Primary Care Physician

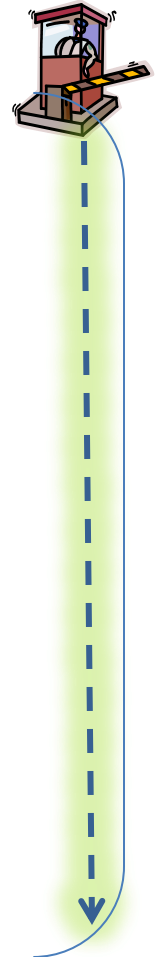
2. Provider describes HIE and offers opt-out



PCP's EHR

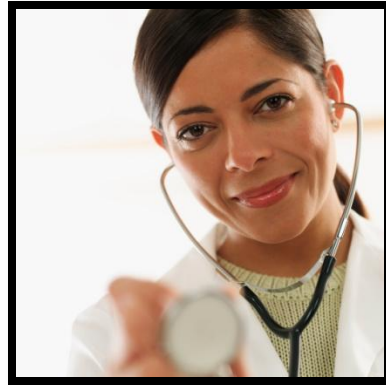


Gen PHI

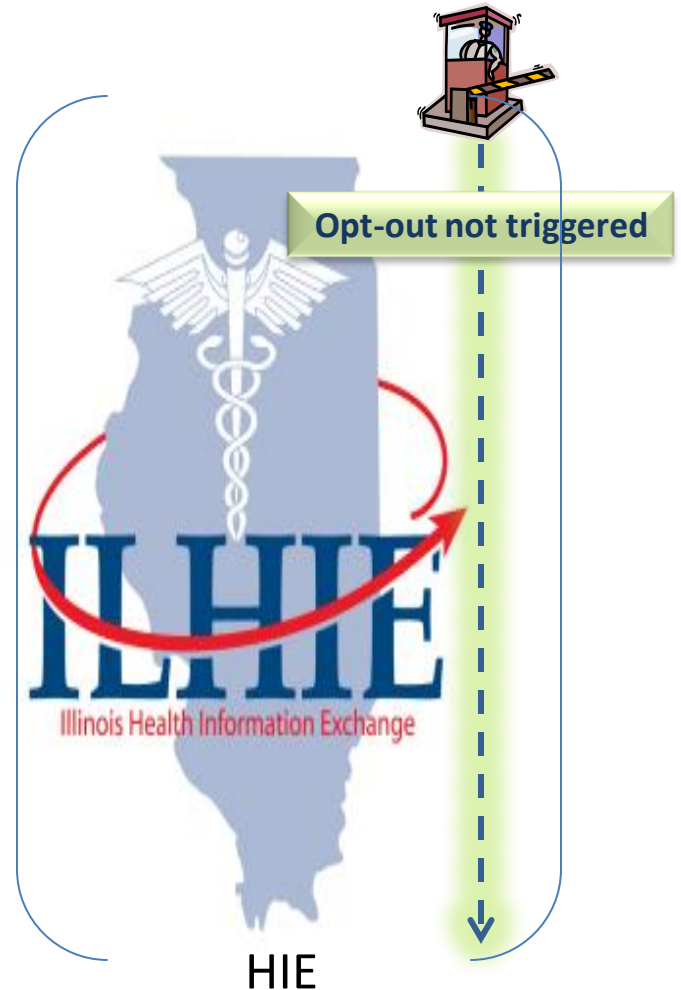


## Stage 1: Creation and Release of PHI Provider Obtains Consent

3. Patient does not opt-out



PCP's EHR



## Stage 1: Creation and Release of PHI Release of MPI and RLS

4. Patient demographic information sent to ILHIE

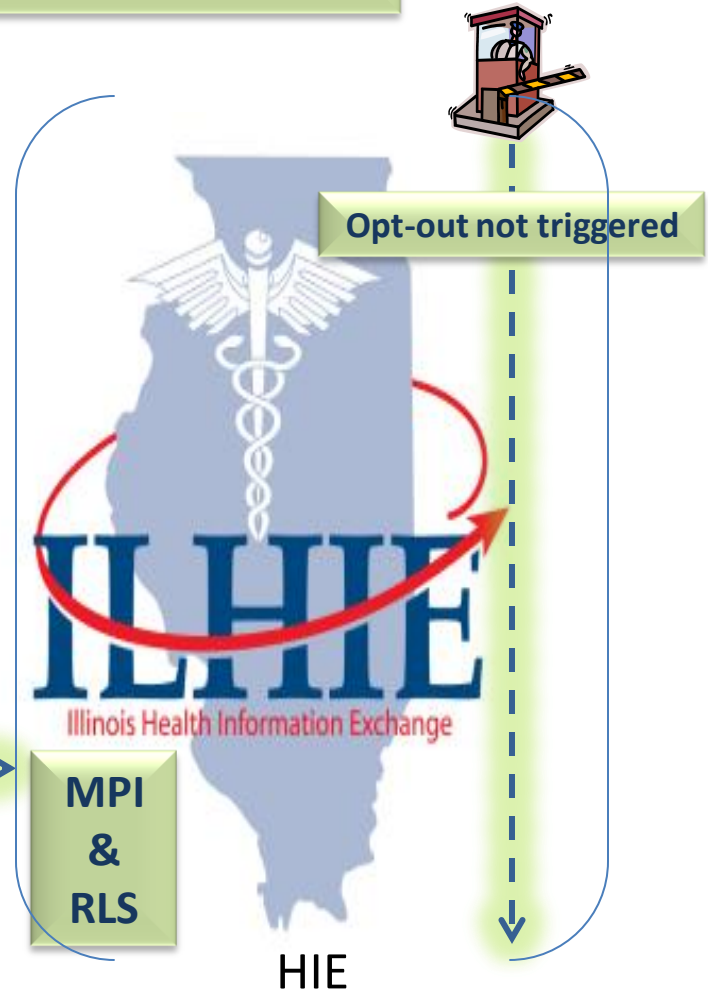
5. Patient data with PCP becomes accessible to ILHIE



PCP's EHR



Gen PHI

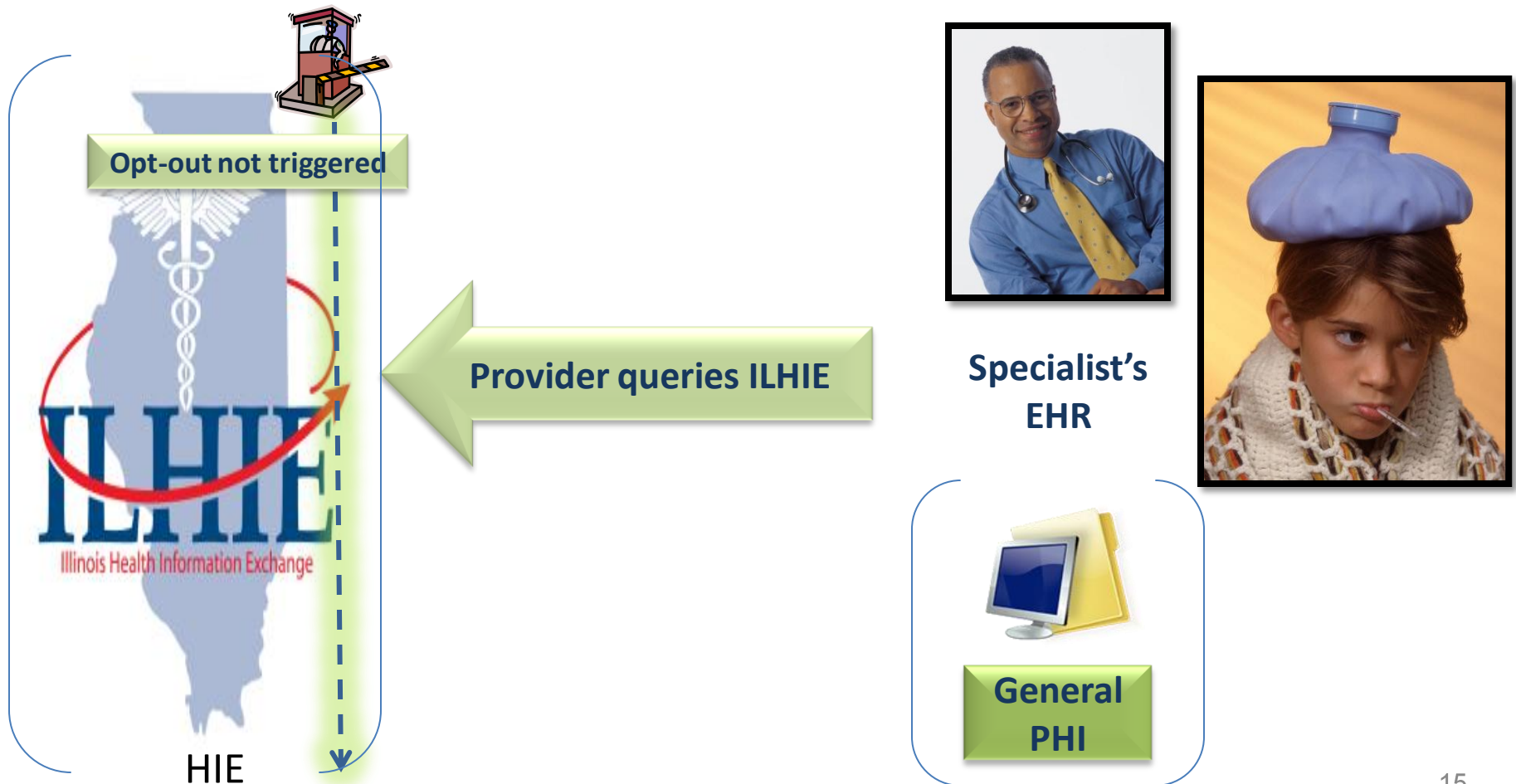




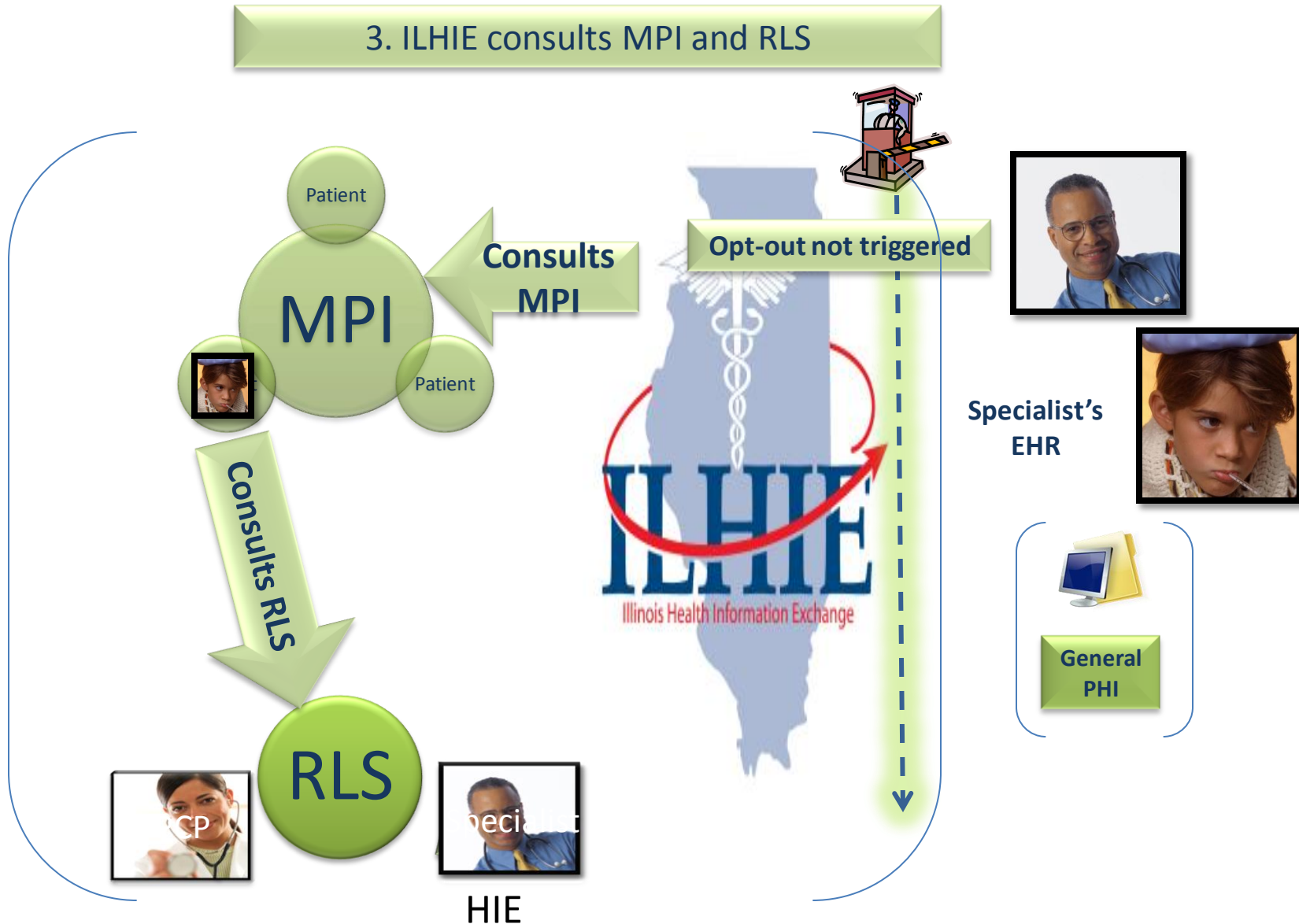
## Stage 2: HIE Query /Response Patient Presents at Specialist

1. Patient presents at ILHIE participating specialist

2. Participating specialist queries ILHIE for Patient's records



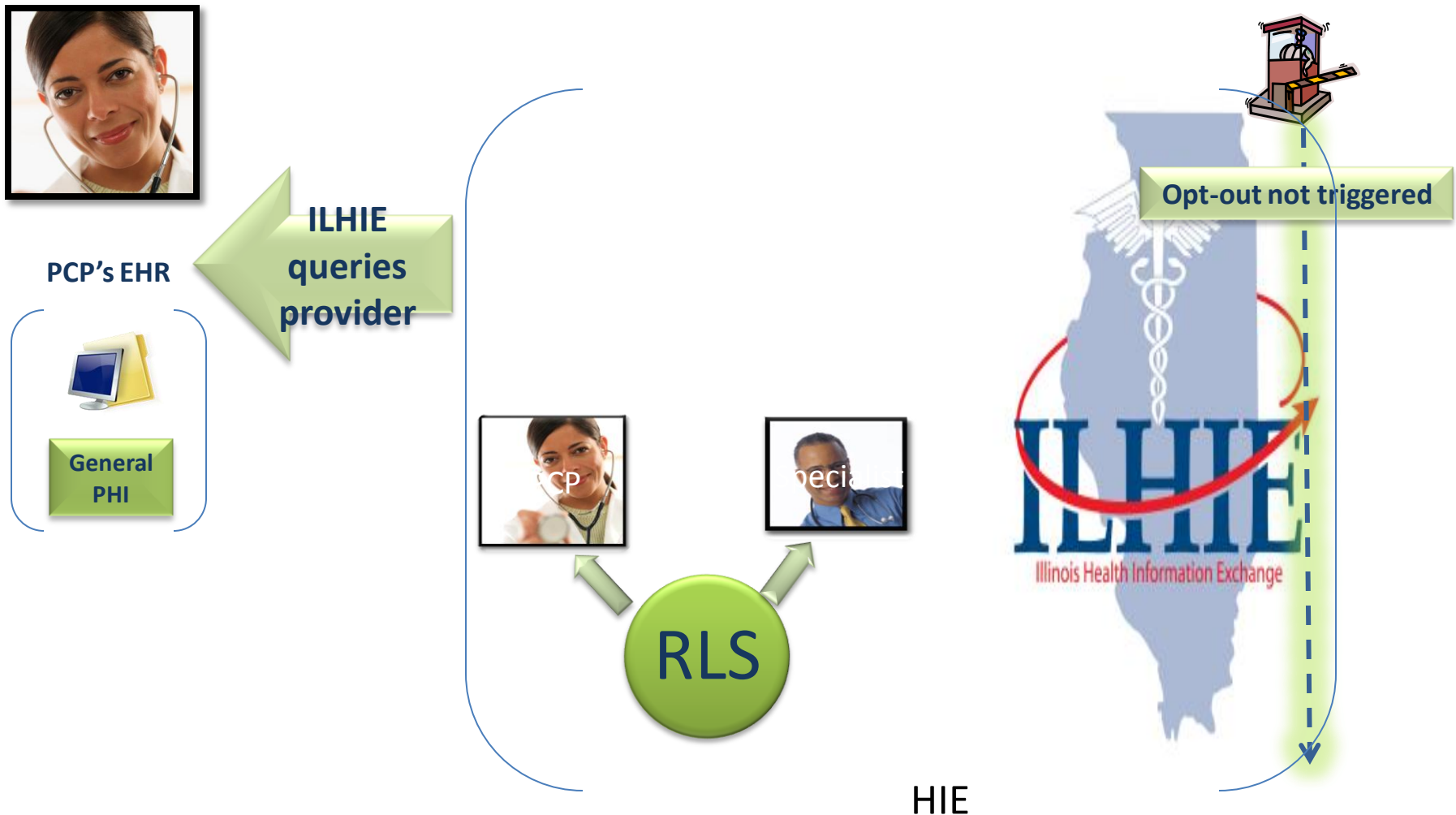
## Stage 2: HIE Query /Response HIE Consults MPI & RLS



## Stage 2: HIE Query /Response

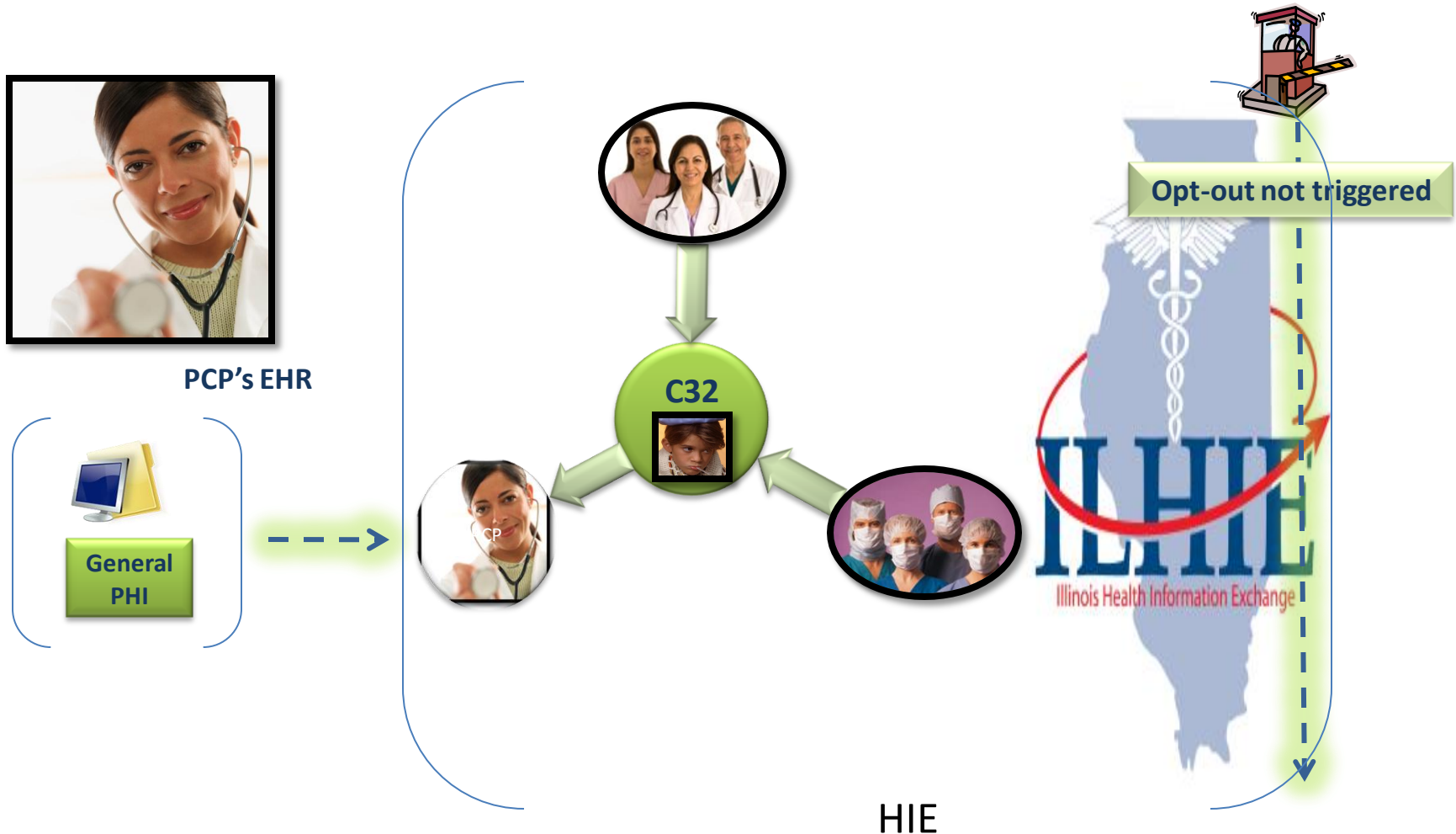
### HIE Query of Participating Providers

4. ILHIE queries providers listed in RLS for Patient's data



## Stage 2: HIE Query /Response Consolidated Patient Record (C32) Generation by HIE

5. ILHIE aggregates data received from providers



## 6. ILHIE delivers consolidated C32 to requesting participating specialist

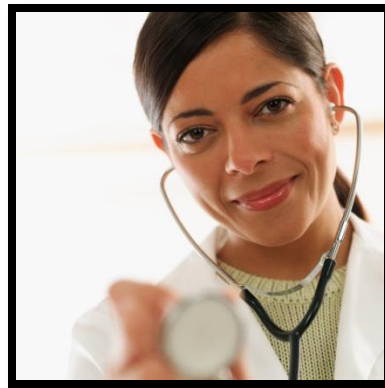


# Stage 1: Creation and Release of PHI

## Patient Presents at Primary Care Physician

1. Patient presents at Primary Care Physician

2. Provider describes HIE and offers opt-out



PCP's EHR



Gen PHI





## Stage 1: Creation and Release of PHI Provider Obtains Consent

### 3. Patient exercises opt-out



PCP's EHR



Gen PHI

Opt-out notice to HIE



Opt-out triggered

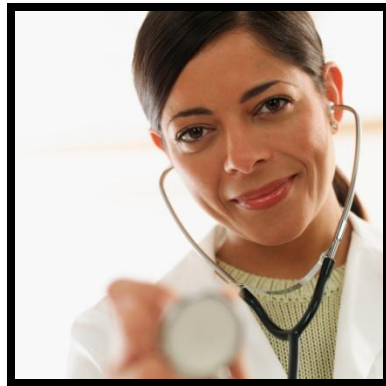


HIE

## Stage 1: Creation and Release of PHI Release of MPI and RLS

4. Patient demographic information sent to ILHIE

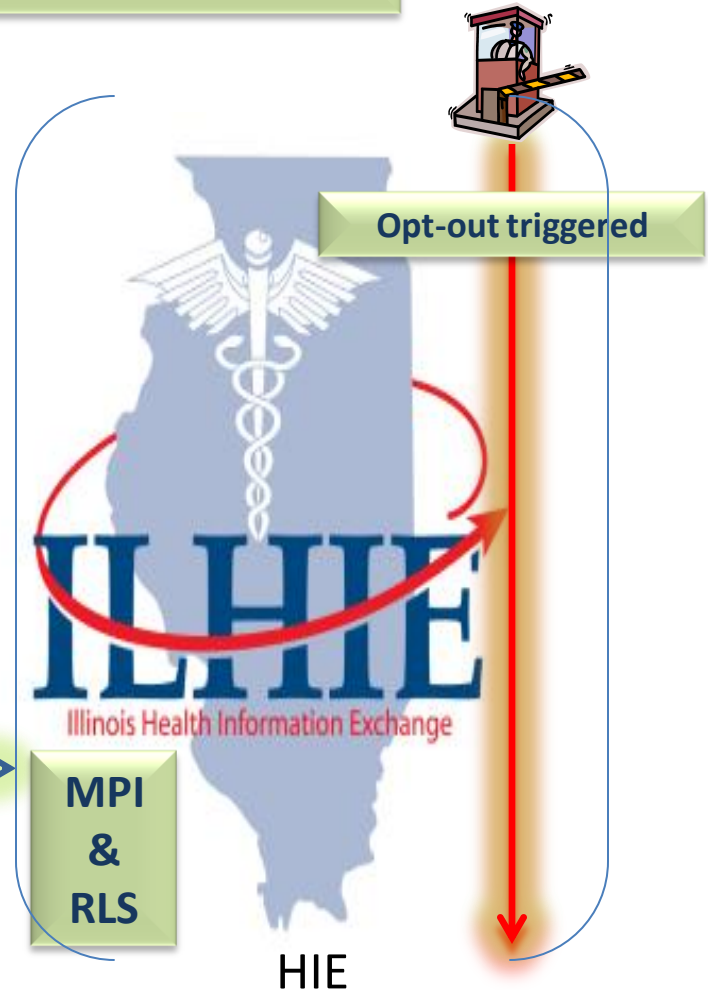
5. Patient data with PCP becomes accessible to ILHIE



PCP's EHR



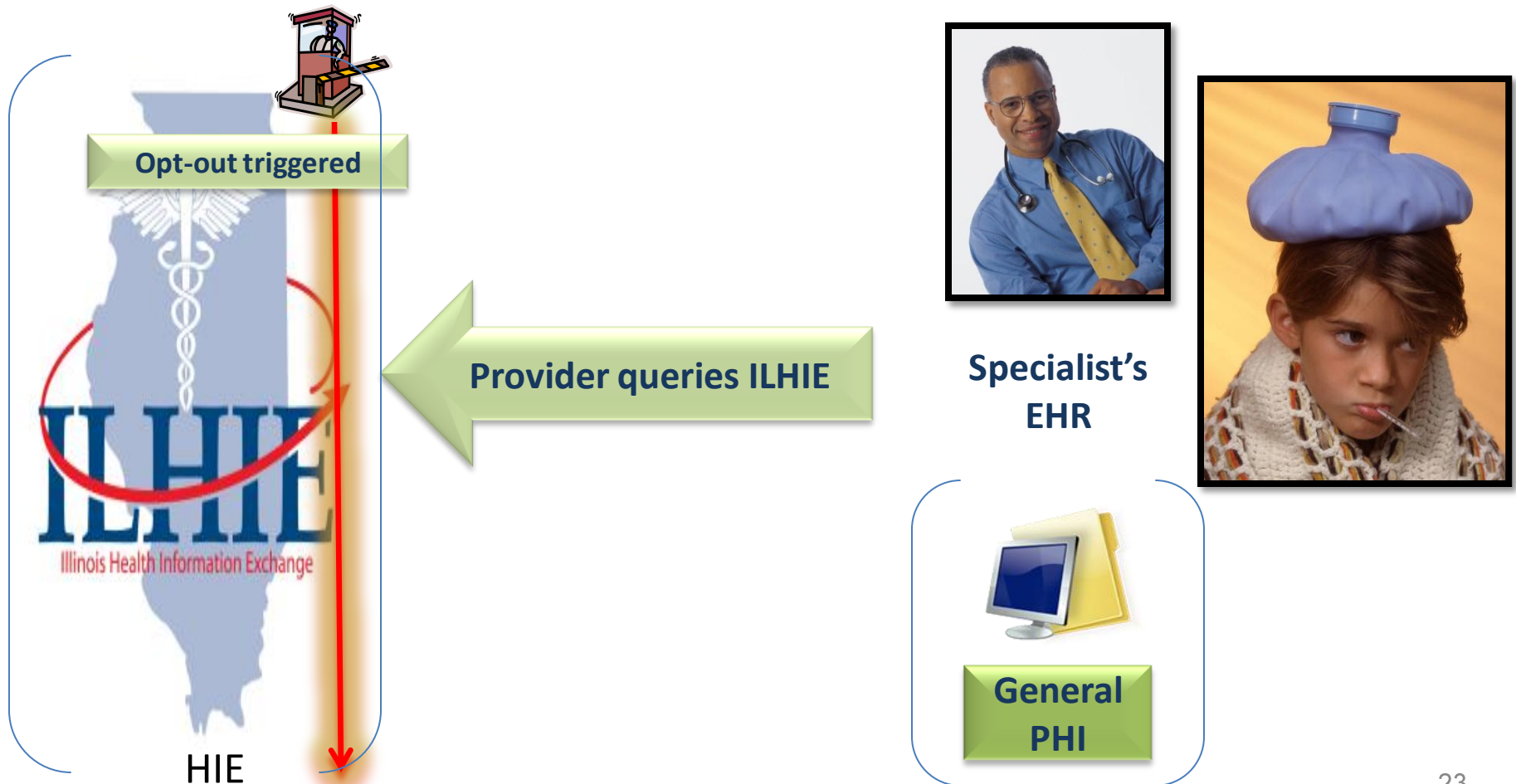
Gen PHI



## Stage 2: HIE Query /Response Patient Presents at Specialist

1. Patient presents at ILHIE participating specialist

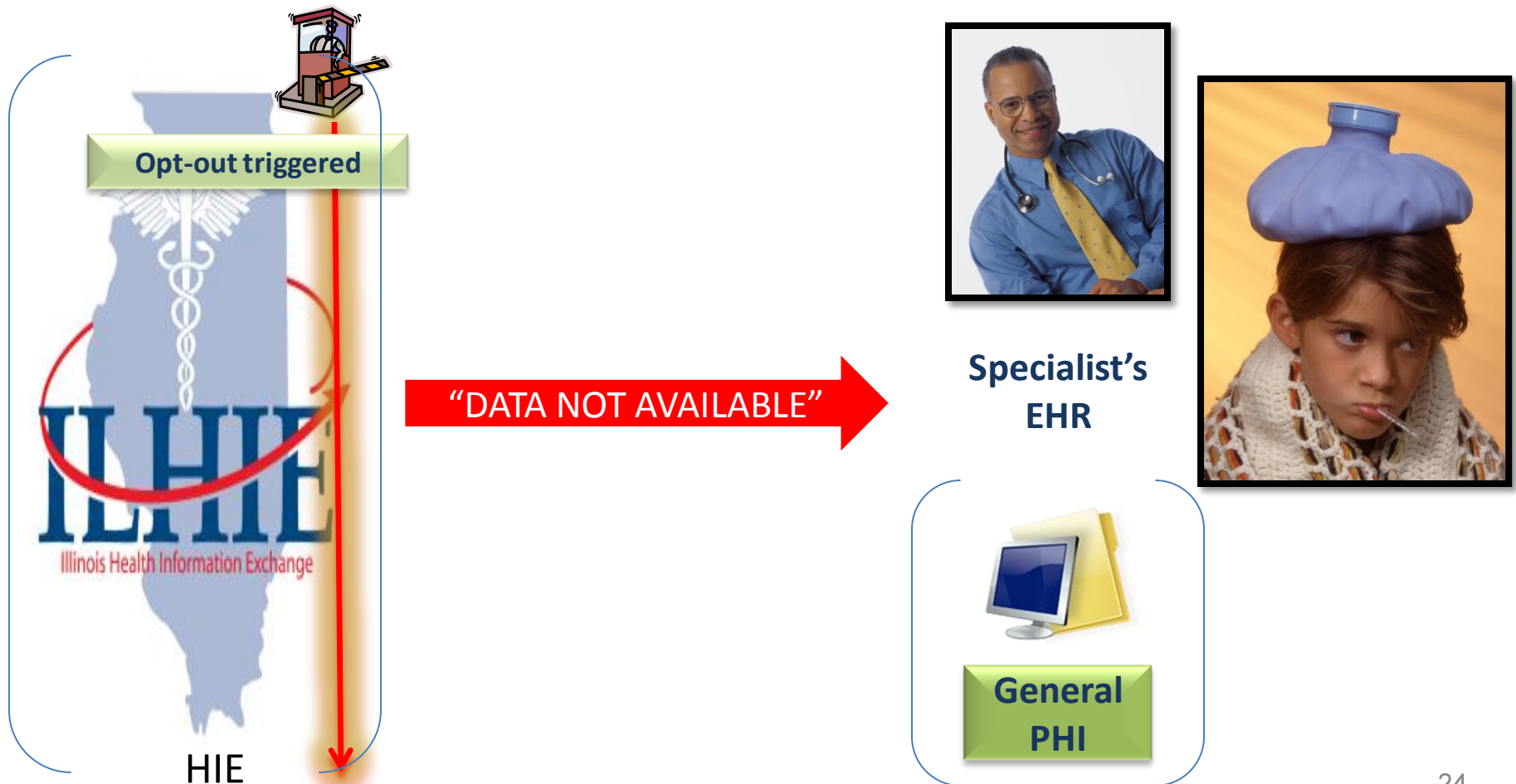
2. Participating specialist queries ILHIE for Patient's records



## Stage 2: HIE Query /Response

### HIE denies access to data

3. HIE returns “DATA NOT AVAILABLE” message



## Stage 2: HIE Query /Response

### Specialist “Breaks-the-glass” to access data

4. Participating specialist submits “BREAK-THE-GLASS” override to certify either:
- a. Patient medical emergency, or
  - b. Patient provided consent

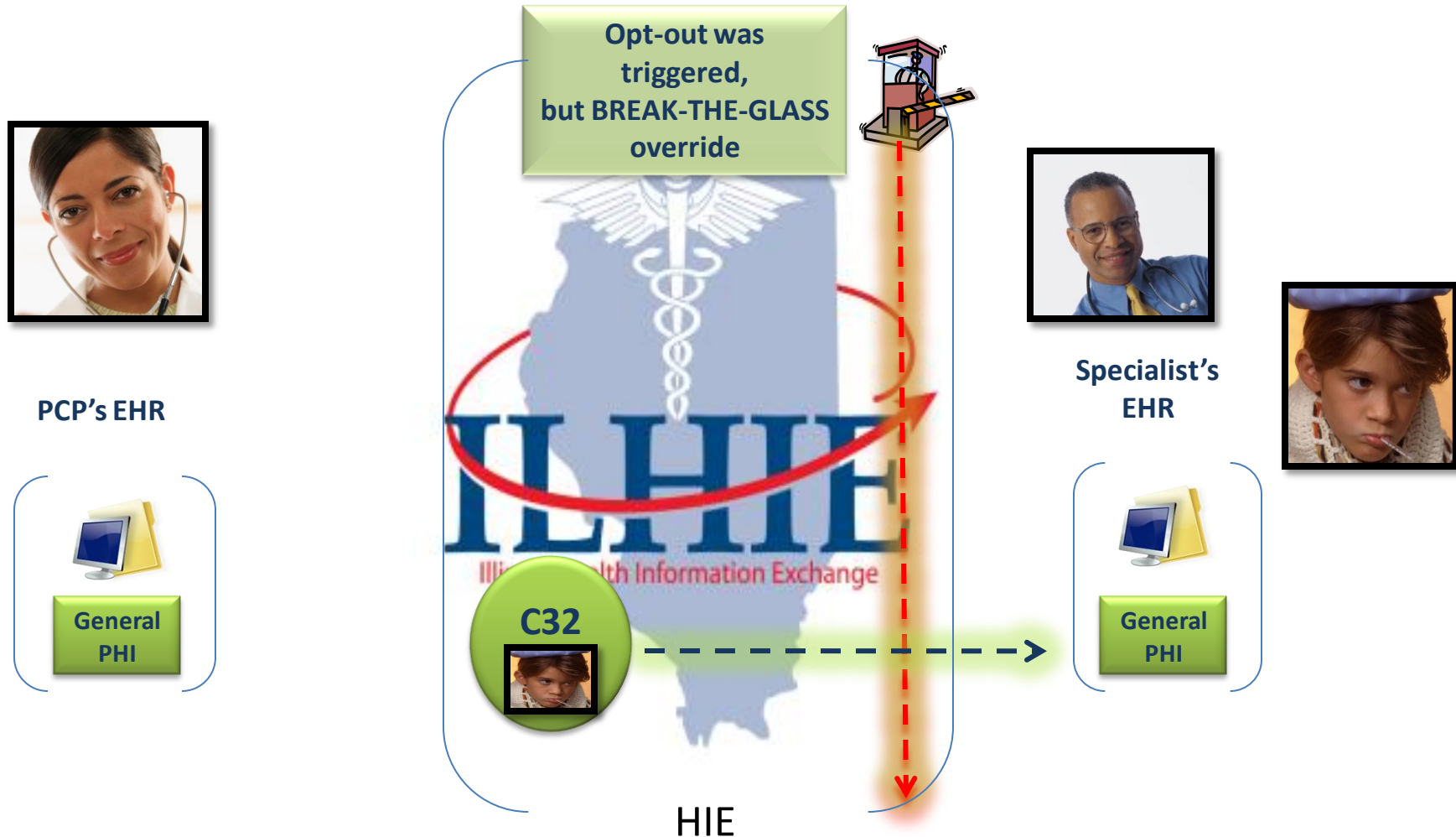




## Stage 2: HIE Query /Response

### ILHIE Processes Query; Delivers C32 to Participating Specialist

5. ILHIE consults MPI and RLS; 6. ILHIE queries providers listed in RLS for Patient's data;
7. ILHIE aggregates data received from providers;
8. ILHIE delivers consolidated C32 to requesting participating specialist





# Legislative Proposal

- Specific statutory amendment being discussed with stakeholders
- ILHIE Legal Task Force Work Groups:
  - Behavioral Health Work Group: Laurel Fleming
  - Substance Abuse Work Group: Renée Popovits



# Thank you for joining us



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